

**UNITED STATES BANKRUPTCY COURT**  
**DISTRICT OF IDAHO (TWIN FALLS)**

Name of Debtor  
Lynn Kotterling  
Jeanne Kotterling

Case Number  
03-41318 - 12

03 JUL 10 PH 1:33

Name of Creditor (The person or other entity to whom the debtor owes money or property):  
Butte Irrigation

Name and Address where notices should be sent:

Butte Irrigation  
PO Box 790  
Paul, ID 83347

- ☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
- ☐ Check box if you have never received any notices from the bankruptcy court in this case.
- ☐ Check box if the address differs from the address on the envelope sent to you by the court.

Telephone Number:

Account or other number by which creditor identifies debtor:

Check here if ☐ replaces ☐ amends a previously filed claim, dated \_\_\_\_\_

**1. Basis for Claim**

- ☒ Goods sold
- ☐ Services performed
- ☐ Money loaned
- ☐ Personal injury/wrongful death
- ☐ Taxes
- ☐ Other \_\_\_\_\_

- ☐ Retiree benefits as defined in 11 U.S.C. § 1114(a)
- ☐ Wages, salaries, and compensation (fill out below)
- Your SS #: \_\_\_\_\_
- Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_ (date) (date)

**2. Date debt was incurred:** 7/5/02

**3. If court judgment, date obtained:**
**4. Total Amount of Claim at Time Case Filed:**

\$ 1195.29

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below.

☐ Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

**5. Secured Claim.**
☐ Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐ Real Estate ☐ Motor Vehicle
- ☐ Other \_\_\_\_\_

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ \_\_\_\_\_

**6. Unsecured Priority Claim.**
☒ Check this box if you have an unsecured priority claim

Amount entitled to priority \$ 1195.29

Specify the priority of the claim:

- ☐ Wages, salaries, or commissions (up to \$4,650),\* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
- ☐ Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
- ☐ Up to \$2,100\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
- ☐ Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).
- ☐ Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- ☐ Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(\_\_\_\_).

\*Amounts are subject to adjustment on 4/1/04 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

**7. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.

**8. Supporting Documents:** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.

**9. Date-Stamped Copy:** To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.

Date

7/8/03

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

Lorraine J. Genzmer

Lorraine J. Genzmer, Off. Mgr.

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

Chapter 12 and 13 claims, along with any supporting must be filed in duplicate.

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*Lynn Ketterling*  
(Receipts Acct)

Prepared By	Initials	Date
Approved By		

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		1	2	3
2002				
5/10	Inv. 14973	53328		
6/13	" 15306	10812		
5/15	" 15667	11591		
5/17	" 16046	8543		64274
6/30	Fin Chg.	1125		65397
7/5	Inv. 19887	4617		
7/5	" 19888	6960		
7/5	" 19890	1296		
7/5	" 19912	9010		
7/5	" 19913	375		
7/8	" 19949	29786		
7/8	" 20024	29800		
7/10	" 20113	3598		
7/31	Fin Chg.	1125		151966
8/14	Inv. 21425	7135		
8/31	Fin Chg.	2620		161721
9/12	Inv 22171	9262		
9/12	" 22177	7463		
9/30	ROA		5000	
9/30	Fin Chg.	2793		176189
10/31	"	3038		179227
11/13	ROA		20000	
11/31	Fin Chg.	2741		161968
12/31	"	2786		164799
2003				
1/31	Fin Chg.	2786		167585
2/25	"	2786		170371
3/31	"	2786		173157
4/4	ROA		20000	
4/25	ROA		20000	
4/30	Fin Chg.	2330		135487
5/31	<del>ROA</del>		20000	
5/31	Fin Chg.	2021		117508
6/30	"	2021		119529